

July 1, 2002 to June 30, 2003

A Message from the ICC Vice Chair, William J. Swiss

Dear Governor Kernan,

n behalf of the members of the Interagency Coordinating Council on Infants and Toddlers, I am pleased to submit the annual report of the ICC.

During the 2002-2003 grant year, the First Steps program provided more than 18,000 children and their families with the services necessary to meet their developmental needs.

As the system continues to evolve in fiscally challenging times, First Steps stakeholders must work to ensure that steps are taken to further refine the processes that drive this system. Accountability and Quality Assurance have always been priorities for the ICC, and results will be seen through the work of the System Outcomes project and other efforts such as credentialing improvement, peer monitoring, and Eligibility Determination teams.

This report includes a "fact sheet" section, which reviews the First Steps mission and vision. The remainder of the report is organized around the five themes by which our key activities are measured:

- ◆ Child Find ◆ Supervision
- **◆ Family-Centered Services**
 - Natural Environments

Transition

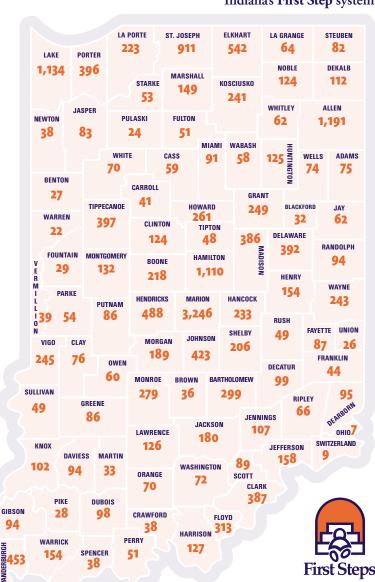
The ICC looks forward to the continued successful evolution of this great program!

Thank you for the opportunity to serve First Steps children and families.

POSEY

Statewide Child Count

An aggregate total of 18,443 children received services through Indiana's First Step system.



Data from July 1, 2002 to July 30, 2003

Child Find Indiana First Steps 6.2% El Providers SFY 2003 Primary Referral Source 1.2% Social Healthy Services **Families** 3.8% WIC **Other Primary Referral Source by Year** Office of Family & Children **SFY 2001** SFY2002 **SFY 2003 Health Care** 7,891 43.7% 8,619 46.0% 9,588 48.2% **32.4**% **Family & Friends** 5,472 **30.3%** 6,007 32.1% 6,455 32.4% Family & **Friends El Providers** 1,621 9.0% 7.7% 1,226 6.2% 1,438 **Other** 4.7% 3.6% 747 3.8% 846 667 48.2% **Healthy Families** 691 3.8% 3.6% 575 2.9% **Health Care** 668 Office of Family **Mental Health** & Children 715 4.0% 594 3.2% 491 2.5% Agencies **Head Start** 83 0.5% 80 0.4% 100 0.5% 0.5% **Head Start Mental Health Agencies** 77 0.4% 0.3% 0.2% 57 33

Eligibility

2.3%

Description	SFY	2001	SFY2	2002	SFY2	2003		
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15% Delay in 2 or more Developmental Domains	1,593	23.0%	2,740	22.0%	2,917	22.0%		
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20% Delay in 1 Developmental Domain	3,197	46.0%	6,729	<b>53.0</b> %	7,091	<b>54.0</b> %		
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At Risk	599	9.0%	683	5.0 %	688	5.0 %		
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### **Indiana First Steps Average Age at Referral**

	SFY 2001	SFY2002	SFY2003					
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Average Age of Referral	13.8	13.8	13.8					
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# Supervision

### **Funding and Fiscal Responsibility**

Indiana First Steps Early Intervention System facilitates and coordinates federal, state, local, and private resources for the payment of early intervention services for Hoosier families. The following funds are managed directly by Indiana First Steps.

## All Sources of Funding for Early Intervention Services: Identification and Coordination of Resources

Sources of Funding Federal	Amount of Funding	Services and/or Activities Supported by Each Source
Federal Part C	\$7,563,937	All Services and Activities
Medicaid Federal	\$7,346,876	El Medical Services, Intake, Eligibility, Claims, Personnel Development & Training, Quality Assurance, Child Find, System Coordination
TANF Federal	\$11,365,023	El Non-Medical Services
State	~~~~~	~~~~~~~~~~~
Early Intervention	\$8,832,412	All services and Activities
Medicaid State	\$3,507,078	El Medical Services, Intake, Eligibility, Claims, Personnel Development & Training, Quality Assurance, Child Find, System Coordination
SSBG State Supplement	t \$11,113,192	All Services
TANF State	\$14,969,639	El Medical Services
MCH/CSHCS State	\$124,473	Intake and Eligibility
Local		
Private Insurance, Fees	~~~~~	~~~~~~
Other(s), Non-F	ederal	
Voluntary Family Co-payments	\$294	All Services
11	Total Early Intervention Support	\$64,822,923

Report Period 07/01/02 to 06/30/03

## Supervision cont'd

## **Complaint Data**

Reporting Period	Nu	Total mber of nplaints	Number of Substantiated Complaints	Primary Provider Types	Federal Codes &/or Indiana Codes	Content of the Complaint	Finding	Resolution
July 1, '02 t	to	5	3	Service	34CFR303.23	Service Coordinator Responsibilities	Inconclusive	None
June 31, '03	3			Coordinator*	470IAC3.1-10-2	Service Coordinator Responsibilities	Inconclusive	None
				~~~	~~~~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~	~~~
				Service	34CFR303.23	Service Coordinator Responsibilities	Substantiated	Disenrolled
				Coordinator	470IAC3.1-10-2	Service Coordinator Responsibilities	Substantiated	Disenrolled
				~~~	~~~~	~~~~~~~	~~~	~~~
				Service	470IAC3.1-11-1	Transition from El System	Inconclusive	None
				Coordinator**	470IAC3.1-11-4	Service Coordinator Responsibilities (Transition)	Inconclusive	None
				~~~	~~~~	~~~~~~~	~~~	~~~
				Service	43CFR303.344(h)	Content of the IFSP (transition)	Inconclusive	Training
4 1				Coordinator**	470IAC3.1-11-1	Transition from El System	Substantiated	Was
	Δ.				470IAC3.1-11-4	Service Coordinator Responsibilities (Transition)	Substantiated	Provided
L WAR		3			34CFR03.342(b)	Procedures for IFSP development,	Inconclusive	
E '////	1	1				review & evaluation. (6-month review)		
					470IAC3.1-9-1(b)	Individual family service plan development,	Inconclusive	
		7				review & evaluation. (6-month review)		
			~~~	~~~	~~~	~~~~~	~~~	~~~

## **Cost Participation**

Cost Participation collection for families exceeding 350% of poverty level began on April 1, 2003. Data on family participation and revenue collection will be available in the next annual report. As cost participation is implemented, it is important to remember that families are not charged for Evaluation, Assessment, IFSP development, and Service Coordination services. Families may request a review of their income as changes occur.

Challenges remain for the system when a family elects to access their private insurance, as most insurers do not recognize First Steps as a "provider." As a result, it has taken longer to implement the billing of private health insurance than anticipated. Several insurance companies are working with First Steps to go through all of the complicated processes involved with billing insurance and determine if any changes in procedures or data collection will be necessary.

### **Credentialing Task Force**

A Credentialing Task Force was convened during this grant year to address issues in Indiana's provider credentialing system. The goal was to identify strategies to make the system more effective in meeting the needs of First Steps children and their families. Recommendations were given to "raise the bar" for early intervention providers in many areas including enrollment, credentialing, re-credentialing, training, supervision and management of the process. The Bureau of Child Development has begun to implement changes to the credentialing process as a result of this group's work.

### **Peer Monitoring**

One of the lead agency's key responsibilities is providing general supervision of programs and activities served with early intervention funding. This process includes on-site reviews in each county every other year. The program includes the review of clinical documentation, early intervention records, and interview with parents, providers and local planners. The peer review is used primarily to provide the local LPCC with information to guide their improvement planning and activities as well as to identify technical assistance needs at the local level.

### **Eligibility Determination (ED) Teams**

In September 2002, Indiana initiated a pilot of Eligibility Determination (ED) Teams in central Indiana. ED teams are assigned to children as they enter the system and are responsible for completing initial evaluations, assisting in determining eligibility and developing initial IFSPs. ED team members remain on the child's IFSP team, but do not provide ongoing services to the child. After the successful pilot ended, ED teams began to be implemented in several areas of the state.

## Supervision cont'd

### **System Outcomes Project**

Indiana was on the leading edge of outcomes research when data collection began in November 2002 to determine if children, families and communities served by First Steps are experiencing important benefits. Preliminary data was

collected during this grant period and future annual reports will feature more comprehensive data on the majority of children receiving early intervention services. Six of the nine outcomes are listed below.

#### First Steps Early Intervention System Outcomes

- **▼** Children attain essential and important developmental skills.
- ➤ Children participate in inclusive community activities, settings, and routines.
- ▶ Families participate as members of the early intervention team and carry out recommendations that help them to help their child.
- Families are connected to other families, associations, and organizations for emotional support.
- Families advocate by exercising their rights in requesting and choosing goals, services, and supports.

#### **Community Outcomes**

Community outcomes have also been established, but data is not yet being collected on those outcomes. In the November 2003 report on the first year of Indiana's Outcome Evaluation Project, data collected from families as they entered (N=3173) and exited (N=1496) First Steps between November 1, 2002, and June 30, 2003, was summarized as follows:

- Most families reported knowing about and exercising their roles as team members, including sharing information during evaluation and assessment (99%); doing things at home that are part of their IFSP and the team's recommendations (99%); and expressing disagreement with other team members at their last IFSP meeting (41%).
- Most exiting families (98%) indicated that they know about information and resources in their communities,



and many exiting families (58%) reported accessing those resources in the three months prior.

As the data continues to be collected and analyzed, Indiana will serve as a leader to other states in early intervention outcomes evaluation.

# **Family-Centered Services**

#### Family to Family Initiative

Family to Family (F2F) continued to grow and expand in 2002–2003. Through outreach and networking activities, F2F Regional Facilitators and parent Points of Contact accomplished the following: (contract period runs from October 1, 2002 to September 30, 2003).

- ▼ Over 7,000 parent packets were distributed, 387 direct contacts were made with First Steps families. 46 parent point of contacts (POCs) were active during this contract period.
- ➤ 22 new families were added to the Unified Training System "Parents as Co-trainers" database.
- ▶ 137 members were registered on the F2F list serv. From

April 1, 2003 to September 30, 2003, 1,274 messages were posted to the list serv.

▶ 18 new families interested in Local Planning and Coordinating Council (LPCC) membership were identified.

Family to Family is committed to working with existing systems, groups, and initiatives to develop a comprehensive approach to supporting the needs of families.

#### **Family Involvement Fund**

Families who participate in various learning opportunities report growth in information and knowledge that they will use to better support their children with special needs. Six hundred ten (610) families accessed the family involvement fund to support their educational activities during this grant year.

## **Natural Environments**

**Indiana's First Steps** has long embraced the federal mandate of providing services in a child's every day routines, activities, and places. The US Department of Education reported the following performance targets and actual performance data for service settings as follows:

#### Numbers of children receiving authorized services

Year	Actual Performance	Performance Targets	Indiana's Actual Performance	
2000	73%	67%	Not Reported	
2001	76%	69%	87%	
2002	82%	71%	88%	
2003	0	78%	90%	

**Indiana** has been working to steadily improve compliance with the 45-day timeline from referral to IFSP and our data shows we are moving in the right direction.

Trend data on Indiana's progress toward the target shows:

- ▼ Indiana's average number of days from referral to IFSP have steadily decreased from 42.3 to 38.3
- ➤ Of Indiana's 92 counties, the number with averages exceeding 45 days has decreased from 29 to 6
- ➤ The percentage of Indiana counties with averages of 45 days or less has increased from 68% to 93.5%

Service Type # of	f children	Service Type # of	of children	
Assistive Technology	1,570	Other Related Services	114	
Audiology	3,548	Physical Therapy	7,551	
<b>Developmental Therapy</b>	7,886	Psychology	388	
<b>Health Services</b>	0	Service Coordination	17,959	
Interpreter Services	186	Social Work	239	
Medical	9	Speech Therapy	10,759	
Nursing	105	Transportation	49	
Nutrition	782	Vision	75	
Occupational Therapy	6,637	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~	

- ▼ The gap between urban and rural counties' performance in this area has narrowed.
- ➤ The percentage of initial IFSPs that exceeded 45 days (for any reason) has decreased from 17.2% to 11.1%

## **Transition**

**ndiana** remains committed to improving transition experiences for families and young children birth through eight years old. First Steps works closely with the Department of Education and the State Transition Initiative to assist communities in creating a comprehensive, community-wide systems approach to transition to ensure positive and effective transition experiences for families and young children. The major focus for the coming year is to continue to improve data collection to evaluate and plan for continued improvement in transition experiences statewide.

#### A Message from the Part C Coordinator— J. Lanier DeGrella

At the end of each year, it's important to look back and reflect on accomplishments, as well as plan for future challenges. This year our accomplishments will drive much of our future planning.

During SFY 2003, we implemented data collection for Statewide Outcomes Evaluation. This information will document the impact of First Steps on child, family and community outcomes in Indiana and provide a basis for improvement planning. Indiana is one of a few states collecting outcome data. Indiana's initiative in this area has resulted in national attention and an opportunity to provide leadership as the US Office of Special Education Programs (OSEP) added child and family outcomes to annual performance reporting requirements for IDEA, Part C programs.

As required by legislation passed by the Indiana General Assembly, First Steps implemented Cost Participation for families with incomes over 350% of poverty on April 1,

2003. While it is to soon to determine the fiscal impact of Cost Participation, we do know that only a small number of families either dropped from or declined participation in First Steps as a result of Cost Participation. The Bureau will continue to monitor this closely.

Another important focus for this year and next is quality assurance. Ongoing activities, such as Peer Monitoring, Provider Credentialing, and Complaint Investigations, are being reviewed and revised as needed to meet the evolving needs of the system. New initiatives, such as Eligibility Determination Teams and the development of Best Practice guidelines for early intervention in Indiana, are expected to support ongoing quality assurance for First Steps children and families. With the number of children served exceeding 18,000 this year, this in an increasing challenge.

The end of another year also reminds us to thank everyone working hard to ensure that Indiana's infants and toddlers with special needs and their families have opportunities for support to meet their individual and family outcomes. *Your continued efforts and support are appreciated!*